

Preventive Health and Health Services Block Grant United States Disease Prevention Program Flexible Funding for Maine's Public Health Programs

The Preventive Health and Health Services (PHHS) Block Grant provides funding for health problems in Maine that range from oral health to cardiovascular health. PHHS Block Grant dollars fund a total of 11 different Maine health programs. Ninety-nine percent (99%) of funds go directly to local communities.

*PHHS Block Grant funds allow Maine to use dollars **where** we need them, **when** we need them to protect the public's health.* A large portion of the PHHS Block Grant funds are used to reduce the burden of disease and death attributable to the 4 leading causes of death in Maine: heart disease, cancer, cerebrovascular disease and unintentional injury. Examples follow of programs that serve our state's unique health needs through the PHHS Block Grant:



Coronary Heart Disease – Maine Cardiovascular Health Program

PHHS Block Grant funds are used to promote cardiovascular health and physical activity in Maine through the use of activities such as the Contest for Communities, ACES (All Children Exercising Simultaneously), Legislative Fitness Day, and other awareness activities. The age-adjusted death rate per 100,000 population due to coronary heart disease dropped from 160.8 in 2001 to 150.8 in 2002 (preliminary data adjusted to year 2000 standard).



Vaccine-Preventable Diseases – Rabies Prevention and Control

PHHS Block Grant funds are used to educate clinicians and practitioners in the appropriate administration of Post-Exposure Prophylaxis (PEP) for suspected rabies exposure in humans. In 2002, there were 0 cases of human rabies. More people prior to 2002 received PEP inappropriately (3.6 persons per 100,000), a 67% reduction (an improvement) over the 1997 baseline. By 2002 less than 2% of those who received PEP, received it inappropriately (<0.1 persons per 100,000), a 96% reduction (an improvement) over the baseline.



Dental Disease Prevention – Oral Health Program

PHHS Block Grant funds are used by the Oral Health Program to direct and coordinate a broad range of program efforts: community oral health promotion and dental disease prevention initiatives, including water fluoridation efforts; policy development and implementation; improvement of systems for data collection, analysis and interpretation, and dissemination; identifying and tracking trends; and training and education of health and allied health providers. Some of the OHP's block grant allocation is used to directly support community programs that coordinate and provide preventive oral health services in two of the more remote, rural and underserved areas of the state.



Continuing Education and Training – Healthy Maine Partnerships

PHHS Block Grant funds are used to support Healthy Maine Partnerships, a coalition representing a variety of community sectors including business/industry, faith-based organizations, information/media, municipal/town administration, recreation, voluntary organizations, education, health, legal/law enforcement, non-profit, and service organizations. The Partnerships have added 641 new coalition members this past year, who have served over 11,000 hours in the prior quarter in the areas of obesity, physical activity and tobacco use. Their efforts are helping to relieve some of the financial pressure created by the state's budget crisis.



Behavioral Risk Factor Surveillance System (BRFSS)

The BRFSS is used to determine the prevalence of behavioral risk factors that may lead to premature mortality, morbidity and disability. Maine Bureau of Health (BOH) programs use the data from the BRFSS for a variety of health related functions including: assessing health of Maine communities, program planning, development, implementation and evaluation, and financial and health care utilization planning and evaluation. The Maine BRFSS program

uses the PHHS Block Grant funds to help support the BRFSS Coordinator position and a half-time research assistant position. In addition, PHHSBG funds are used for operating and costs at the state level and to partially fund contractual costs for data collection, management and analysis.



Integrated Hepatitis Program

PHHS Block Grant funds are used to test and counsel persons at high-risk for hepatitis C virus infection. To date, 188 (19%) of 996 high-risk persons tested have evidence of hepatitis C infection. Sixty-nine percent of those testing positive are between 18-39 years old. Early identification of hepatitis C infection is crucial because earlier intervention can help prevent progression to serious liver disease or death. One hundred and thirteen (60%) of the 188 positive cases first learned about their infection through this testing and counseling project. Creation of free hepatitis C testing and counseling has helped the Bureau of Health to exceed the Healthy Maine 2010 goal of identifying 35% of the estimated 20,000 Mainer's infected with hepatitis C.

Sexually Transmitted Diseases

The Preventive Health and Human Services (PHHS) Block Grant provides funding to: (a) reduce the illness and long-term health outcomes associated with sexually transmitted diseases and HIV/AIDS; (b) provide public health disease control by reducing the spread of these diseases; and (c) offer treatment to individuals and their partners who test positive for chlamydia and gonorrhea. In 2004, 132 individuals were contacted by the Disease Intervention Specialist funded through this grant and offered education, treatment, if needed, and partner services. Over one thousand (1000) people and their partners were treated for chlamydia and gonorrhea with medications purchased with PHHS Block Grant funds. All of the STD Program's PHHS Block Grant dollars go directly to local communities.



Tuberculosis Control Program

The Tuberculosis (TB) Control Program is responsible for all tuberculosis disease surveillance in Maine. Surveillance data is used to develop strategies for the control and prevention of TB in the State. Maine has surpassed the national year 2000 TB elimination goal of 3.5 cases per 100,000 population. Maine's 2004 TB case rate was 1.6 cases per 100,000, compared to 5.1 cases per 100,000 nationally (2003).



Community Health Promotion Program

CHPP works with local communities to increase the ability to plan and improve local community health and quality of life using community-based approaches. We have helped support the development of over 40 different community health initiatives across the state. Provide training, funding, technical assistance, and resources to these initiatives, and recently funded over 23 local comprehensive community health assessment projects. CHPP provided funding in the start up of the statewide Maine Network of Healthy Communities and the two meetings they have sponsored.



Injury Prevention and Control Program

PHHS block grant funds support activities to collect, analyze and disseminate data on the incidence of injury morbidity and mortality in the state. Injury is the leading cause of death for Maine residents under age 54 and the fifth leading cause of death for all ages and these data are essential to promoting public awareness of the injury problem and fine tuning program activities to address the most serious injuries. We also use these funds to support evaluation of several key youth suicide prevention training programs implemented statewide to gauge the effectiveness of these programs. We have determined, thorough evaluation, that there is a positive impact of these training programs for both youth and adults. Evaluation results from 616 adults and 463 children demonstrate that the training was successful in producing positive changes in



help seeking, knowledge, perceptions of school readiness, and talking about suicide.



Dora Anne Mills, MD, MPH Director and State Health Officer, Maine Bureau of Health, Maine Department of Health and Human Services:

"The PHHS Block grant is a vital source of funding for some of Maine's core prevention efforts that do not have other sources of funding. The changing nature of public health issues and priorities requires a reliable and flexible source of funding".

Maine Department of Health and Human Services

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